05/17/2011 12:48

Image# 11931445280

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		For Other Than Air Authorized Committee	Office Use Only
1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines	
1	Pacific Life Insurance Compa	any Political Action Committee	
1			
		7001 .0 . 5:	
AD	DRESS (number and street)	700 Newport Center Drive	
	Check if different than previously reported. (ACC)	Newport Beach	CA 92660
2.	FEC IDENTIFICATION NUM	BER V CITY	STATE A ZIPCODE A
	C00068528	3. IS THIS X NEW (N) OR	AMENDED (A)
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report Feb 20 (M2) X May 20 (M5)	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	Mar 20 (M3) Jun 20 (M6)	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report(Q	Apr 20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
	July 15	(c) 12-Day Primary (12P)	General (12G) Runoff (12R)
	Quarterly Report(Q October 15	Report for the: Convention (12C)	Special (12G)
	Quarterly Report(Q January 31 Quarterly Report(Yl		in the State of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election General (30G)	Runoff (30R) Special (30S)
	Termination Report	Report for the:	
	(TER)	Election on	in the State of
5.	Covering Period 0 4	0 1 2 0 1 1 through 0 4	30 2011
l ce	ertify that I have examined this F	Report and to the best of my knowledge and belief it is true, correct	and complete.
Тур	pe or Print Name of Treasurer	Patricia Douglass	
Sig	gnature of Treasurer Ele <u>ctro</u>	nically Filed by Patricia Douglass	Date 05 17 2011
NC	DTE : Submission of false, error	neous, or incomplete information may subject the person signing th	nis Report to the penalties of 2 U.S.C 437g.
	Office Use Only		FEC FORM 3X (Rev. 12/2004)
FE	6AN026		

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Pacific Life Insurance Company Political Action Committee

FEC Form 3X (Rev. 02/2003)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Ha Januar	V V V V		34626.87
(b) Cash on Ha Begining of	and at Reporting Period	64020.80	
(c) Total Recei	pts (from Line 19)	28568.97	80962.90
(d) Subtotal (ad	dd lines 6(b) and		
6(c) for Col 6(a) and 6(d	umn A and Lines c) for Column B)	92589.77	115589.77
Total Disbursem	ents (from Line 31)	0.00	23000.00
Cash on Hand at Reporting Period (subtract Line 7 f		92589.77	92589.77
Debts and Obligathe committee (It Schedule C and/		0.00	
). Debts and Obliga the committee (It Schedule C and/		0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

м м 0 4 0 1 м°м 0 4 3 0 2011 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 22034.64 44000.58 (i) Itemized (use Schedule A) 6534.33 36962.32 (ii) Unitemized (iii) TOTAL (add 28568.97 80962.90 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 28568.97 80962.90 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 28568.97 80962.90 12, 13, 14, 15, 16, 17, and 18(c))

FE6AN026

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

28568.97

80962.90

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements Page 4

II. DISBURSEMENTS	COLUMN A	COLUMN B
Operating Expenditures:	Total This Period	Calendar Year-to-Date
(a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(i) i ederal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	0.00	0.00
(c) Total Operating Expenditures	~ 0.00	0.00
(add 21(a)(i), (a)(ii) and (b)) 2. Transfers to Affiliated/Other Party	• 0.00	0.00
Committees		0.00
3. Contributions to		
Federal Candidates/Committees and Other Political Committees	0.00	23000.00
4. Independent Expenditure	0.00	2.22
(use Schedule E)5. Coordinated Expenditures Made by F	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)		0.00
(use Schedule F)		0.00
6. Loan Repayments Made		0.00
, ,		
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	🗩 0.00	0.00
9. Other Disbursements	0.00	0.00
a. Other dispursements		0.00
0. Federal Election Activity (2 U.S.C 43	1(20))	
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid En	tirely	
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (a	add	2.22
Lines 30(a)(i), 30(a)(ii) and 30(0.00	0.00
31. Total Disbursements (add Lines 21)		
23, 24, 25, 26, 27, 28(d), 29 and 30	(c)) 0.00	23000.00
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a		222222
from Line 31)	0.00	23000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	28568.97	80962.90	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	28568.97	80962.90	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
87.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 39 (check only one) X		
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pe	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions		
Full Name (Last, First, Middle Initial) MS. KATHLEEN D SIMMONS Mailing Address 27403 HYATT CT	MS. KATHLEEN D SIMMONS				
City LAGUNA NIGUEL	State CA	Zip Code 92677-3700	Transaction ID: 9987817 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Pacific Life Receipt For: Primary General Other (specify) ▼		n e President e Year-to-Date ▼ 500.00	Check		
Full Name (Last, First, Middle Initial) MR. R. STEPHEN HANNAHS Mailing Address 740 VIA LIDO NOR	Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y				
City	State	Zip Code	Transaction ID: 9987819		
NEWPORT BEACH	CA	92663-5523	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.			1000.00		
Name of Employer Pacific Life Receipt For: Primary Other (specify) ▼	Occupation Director Aggregate	Year-to-Date ▼	Check		
Full Name (Last, First, Middle Initial) MR. JEFFREY R DEY					
Mailing Address 5 MAGNOLIA DR			04 06 2011		
City	State	Zip Code	Transaction ID: 9987821		
LADERA RANCH FEC ID number of contributing federal political committee.	CA	92694-0710	Amount of Each Receipt this Period 1610.00		
Name of Employer Occupation Pacific Life Asst. Vic		n e President			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1610.00	Check		
SUBTOTAL of Receipts This Page (option	al)		3110.00		

		for each category of the Detailed Summary Page	(check only one) X 11a		
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and addr	not be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Pacific Life Insurance Company Polit	tical Action Cor	mmittee			
Full Name (Last, First, Middle Initial) MR. THOMAS S BEADLESTON	MR. THOMAS S BEADLESTON				
Mailing Address 21 CYPRESS TREE	04 06 2011				
City	State	Zip Code	Transaction ID: 9987822		
IRVINE	CA	92612-2211	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		900.00		
Name of Employer Pacific Life	Occupation Vice Presi	dent			
Receipt For:	Aggregate \	Year-to-Date ▼			
Primary General Other (specify) ▼		900.00	Check		
Full Name (Last, First, Middle Initial) MR. THOMAS C SUTTON			Date of Receipt		
Mailing Address 111 SHORECLIFF R	0 4				
City	State	Zip Code	Transaction ID: 9987825		
CORONA DEL MAR FEC ID number of contributing	CA	92625-2646	Amount of Each Receipt this Period 5000.00		
federal political committee.	0				
Name of Employer Pacific Life	Occupation Chairman	(Ret.)			
Receipt For: Primary General	Aggregate \	Year-to-Date ▼			
Primary General Other (specify) ▼		5000.00	Check		
Full Name (Last, First, Middle Initial) MR. JOHN K O'CONNELL			Date of Receipt		
Mailing Address 11529 FALL CREEK	RD		04 19 2011		
City	State	Zip Code	Transaction ID: 9987826		
INDIANAPOLIS	IN	46256-9413	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer Pacific Life	Occupation Field Exec				
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 350.00	Check		
SUBTOTAL of Receipts This Page (optional)			6250.00		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 39 (check only one) X			
or for commercial purposes, other than using the	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Committee				
Full Name (Last, First, Middle Initial) MS. JILL M WALSH					
Mailing Address 120 S CALLE DIAZ	04 21 2011				
City ANAHEIM	State Zip Code CA 92807-3907	Transaction ID: 9987827 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	300.00			
Name of Employer Pacific Life	Occupation Budget Analyst				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Check			
Full Name (Last, First, Middle Initial) MS. JUNE G ARCE		Date of Receipt			
Mailing Address 20050 EMERALD ME	0 4 3 0 Y Y Y Y Y				
City	State Zip Code	Transaction ID: PR10362104843			
WALNUT	CA 91789	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	60.00			
Name of Employer Pacific Life	Occupation DIR MKTG COMPL				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	210.00	P/R Deduction (\$60.00 Mon- thly)			
Full Name (Last, First, Middle Initial) MR. ALAN H BROWN		Date of Receipt			
Mailing Address 505 13TH ST	04 30 7 2011				
City	State Zip Code	Transaction ID: PR10362254843			
HUNTINGTON BEACH	CA 92648	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	70.00			
Name of Employer Pacific Life	Occupation AVP ITS STRATEGIC SVCS				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	P/R Deduction (\$70.00 Monthly)			
CURTOTAL of Province This Province (Author)		430.00			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Pacific Life Insurance Company Politi	cal Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. DEWEY P BUSHAW			Date of Receipt
	Mailing Address 29132 ALFIERI ST	04 30 7 2011		
	City	State	Zip Code	Transaction ID: PR10362304843
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		167.00
	Name of Employer Pacific Life	Occupation EXEC VI		7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		668.00	P/R Deduction (\$167.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. EDWARD R BYRD			Date of Receipt
	Mailing Address 17520 PAGE CT	04 30 2011		
	City	State	Zip Code	Transaction ID: PR10362324843
	YORBA LINDA	CA	92886	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Pacific Life	Occupation SR VP &	n CHF ACTG OFCR	7
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		425.00	P/R Deduction (\$125.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. JOSEPH E CELENTANO			Date of Receipt
	Mailing Address 26661 CAMPESINO			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362384843
	MISSION VIEJO	CA	92691	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	7		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		392.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 39 (check only one)
An	ny information copied from such Reports and Sifor commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic			
/	Full Name (Last, First, Middle Initial) MS. GAIL C MOSCOSO	Date of Receipt		
	Mailing Address 31558 WEST NINE DF	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City State Zip Code				Transaction ID: PR10362484843
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			
	Name of Employer Pacific Life	Occupatio VP CLIE	n NT SERVICES	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	P/R Deduction (\$60.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MR. DENNIS M CORBETT	Date of Receipt		
	Mailing Address 15136 TOURAINE WA	04 30 2011		
	City IRVINE	State CA	Zip Code	Transaction ID: PR10362514843
	FEC ID number of contributing federal political committee.	C	92604	Amount of Each Receipt this Period
Name of Employer Pacific Life Occupation VP TAX COMPLIANCE				
	I VE IAA		Year-to-Date ▼	
	Primary General Other (specify) ▼	General		P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MS. DEBRA CUNNINGHAM HONERKAMP			Date of Receipt
	Mailing Address 2712 LIGHTHOUSE LI	0 4 3 0 Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR10362564843
	CORONA DEL MAR	CA	92625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life Occupation AVP RE ASSET MGMT			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
_	UBTOTAL of Receipts This Page (optional)	l		260.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action Committee	
Z	Full Name (Last, First, Middle Initial) MR. MICHAEL R CURRY		Date of Receipt
	Mailing Address 12162 WICKLOW LN	0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR10362574843
	NAPLES FEC ID number of contributing federal political committee.	FL 34120	Amount of Each Receipt this Period 100.00
	Name of Employer Pacific Life	Occupation FVP FIELD WHOLESALING	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. STEPHANIE J CURRY	Date of Receipt	
	Mailing Address PO BOX 15358	04 30 2011	
	City	State Zip Code	Transaction ID: PR10362594843
	IRVINE FEC ID number of contributing federal political committee.	CA 92623	Amount of Each Receipt this Period 90.00
	Name of Employer Pacific Life	Occupation AVP ADVANCED SALES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$90.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MS. LINDA D LARSON	Date of Receipt	
	Mailing Address 8315 ROAD R NW	04 30 2011	
	City	State Zip Code	Transaction ID: PR10362624843
	QUINCY	WA 98848	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer Pacific Life	Occupation AVP IND COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$120.00 Monthly)
Γ	SURTOTAL of Receipts This Page (optional)		310.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 39 (check only one) X			
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	al Action Co	ommittee				
Full Name (Last, First, Middle Initial) MR. MARK R FALK			Date of Receipt			
Mailing Address 64 SUMMERSTONE	Mailing Address 64 SUMMERSTONE					
City IRVINE	Transaction ID: PR10362714843 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	CA	92614	125.00			
Name of Employer Pacific Life	Occupation AVP STF	n RATEGIC PROGRAMS				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$125.00 Monthly)			
Full Name (Last, First, Middle Initial) MS. MARTHA A GATES			Date of Receipt			
Mailing Address 31411 MONTEREY ST	0 4 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City LAGUNA BEACH	State CA	Zip Code 92651	Transaction ID: PR10362864843 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		416.66			
Name of Employer Pacific Life	Occupation SR VP O	PERATIONS				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1016.66	P/R Deduction (\$416.66 Monthly)			
Full Name (Last, First, Middle Initial) MR. FRANK J GOETZ						
Mailing Address 7 SOVENTE						
City IRVINE	State	Zip Code	Transaction ID: PR10362904843			
FEC ID number of contributing federal political committee.	CA	92606	Amount of Each Receipt this Period 70.00			
Name of Employer Pacific Life	Occupation AVP RIS	K SELECTION				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 280.00	P/R Deduction (\$70.00 Mon-thly)			
SUBTOTAL of Receipts This Page (optional)			611.66			
TOTAL This Period (last page this line number of	only)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MR. ADRIAN S GRIGGS	Date of Receipt		
	Mailing Address 8766 CANARY AVE	04 30 7 2011		
	City	State	Zip Code	Transaction ID: PR10362964843
	FOUNTAIN VALLEY	CA	92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupatio SR VP F	n INANCE & RISK	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. BRENDA K HARDWIG			Date of Receipt
	Mailing Address 13112 EARLHAM ST			04 30 7 2011
	City	State	Zip Code	Transaction ID: PR10363034843
	SANTA ANA	CA	92705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Receipt For: Ag		n NITY RELTNS COORD	
			e Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$60.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MR. ROBERT G HASKELL			Date of Receipt
	Mailing Address 1880 N EL CAMINO F	REAL		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: PR10363064843
	SAN CLEMENTE	CA	92672	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.66
	Name of Employer Pacific Life	Occupatio SVP BR/	n AND MGMT & PA	
	Receipt For: Aggreg		e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1666.64	P/R Deduction (\$416.66 Monthly)
Г	SUBTOTAL of Receipts This Page (optional)			576.66

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 39 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. DALE E HAWLEY			Date of Receipt
	Mailing Address 2702 SAN JOAQUIN	HILLS RD		04 30 7 2011
	City CORONA DEL MAR	State CA	Zip Code 92625	Transaction ID: PR10363074843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		74.00
	Name of Employer Pacific Life	Occupation AVP CO		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 296.00	P/R Deduction (\$74.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. ROBERT J HEMSTEAD			Date of Receipt
	Mailing Address 5613 DAISY ST			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: PR10363104843
	SIMI VALLEY FEC ID number of contributing federal political committee.	CA	93063	Amount of Each Receipt this Period 85.00
	Name of Employer Pacific Life	Occupatio		
	Receipt For:		ALUATION ACTUARY e Year-to-Date ▼	
	Primary General Other (specify) ▼		340.00	P/R Deduction (\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. KEVIN A HENDRA			Date of Receipt
	Mailing Address 58 VIAGGIO LN			0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10363114843
	FOOTHILL RANCH FEC ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 75.00
	Name of Employer Pacific Life	Occupation AVP TAX		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 255.00	P/R Deduction (\$75.00 Mon-thly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		234.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
Α ο	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action C	ommittee	
<u></u>	Full Name (Last, First, Middle Initial) MR. HOWARD T HIRAKAWA			Date of Receipt
	Mailing Address 23972 GOLDENEYE	DR		04 30 2011
	City LAGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: PR10363164843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02077	100.00
	Name of Employer Pacific Life	Occupation VP INV /	n ADVISOR OPS	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. CAROL A JENSEN			Date of Receipt
	Mailing Address 8554 202ND STREE	T SW		04 30 7 9 11
	City	State	Zip Code	Transaction ID: PR10363244843
	EDMONDS	WA	98026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pacific Life	Occupation NATL SI	n LS MGR M CHANNEL	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$250.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. JEFF R JOHNSON			Date of Receipt
	Mailing Address 1 SAND OAKS RD.			04 30 7 2011
	City	State	Zip Code	Transaction ID: PR10363254843
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer Pacific Life	Occupation AVP CO	RP FIN	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	P/R Deduction (\$55.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	•		405.00

SCHEDULE A (FEC FO	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 39 (check only one) X 11a
	Reports and Statements may not be sold or used by any person han using the name and address of any political committee to	
NAME OF COMMITTEE (In Fu Pacific Life Insurance Com	ll) pany Political Action Committee	
Full Name (Last, First, Middle Ir MR. MARK J JOHNSON	itial)	Date of Receipt
Mailing Address 1812 LEAD	BURN RD	M M / D D / Y Y Y Y Y O D D / 2 D 1 1
City TOWSON	State Zip Code MD 21204	Transaction ID: PR10363274843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Pacific Life	Occupation FVP FIELD WHOLESALING	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	P/R Deduction (\$150.00 Monthly)
Full Name (Last, First, Middle Ir MR. SCOTT E JOHNSON	itial)	Date of Receipt
Mailing Address 906 NEWT	ON LN	04 30 7 2011
City	State Zip Code	Transaction ID: PR10363284843
PLACENTIA FEC ID number of contributing federal political committee.	CA 92870	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation VP CORPORATE TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Ir MS. SUZANNE T KAMPA	itial)	Date of Receipt
	IFORD AVE	0 4 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR10363324843
GARDEN GROVE FEC ID number of contributing federal political committee.	CA 92845	Amount of Each Receipt this Period 60.00
Name of Employer Pacific Life	Occupation IT AUDIT CONS	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$60.00 Mon-thly)
SUBTOTAL of Receipts This Page	e (optional)	310.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 39 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. BRIAN D KLEMENS			Date of Receipt
	Mailing Address 24611 BENJAMIN CI			04 30 2011
	City DANA POINT	State CA	Zip Code 92629	Transaction ID: PR10363374843
	FEC ID number of contributing federal political committee.	C	92029	Amount of Each Receipt this Period 80.00
	Name of Employer Pacific Life	Occupation VP & CC	ORPORATE CONTROLLER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	P/R Deduction (\$80.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. JOHN P KONTOS			Date of Receipt
	Mailing Address 6307 CAMINO MARII	0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR10363424843
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer Pacific Life	Occupation VP INST	on TITUTIONAL MARKETS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$150.00 Monthly)
	Full Name (Last, First, Middle Initial) MS. JODY L LINNEMAN			Date of Receipt
	Mailing Address 262 S FAIRFIELD LN	Į		04 30 2011
	City	State	Zip Code	Transaction ID: PR10363454843
	ORANGE	CA	92869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Pacific Life	Occupation AVP CO	UNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 340.00	P/R Deduction (\$85.00 Monthly)
Γ,	SUBTOTAL of Receipts This Page (optional)	1		315.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for eac	eparate schedule(s) th category of the ed Summary Page	FOR LINE NUMBER: PAGE 18 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
0	ny information copied from such Reports and s r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and address of ar	ny political committee to	n for the purpose of soliciting contributions
	Pacific Life Insurance Company Politi	cal Action Committee)	
_	Full Name (Last, First, Middle Initial) MR. FLETCHER C LARSON			Date of Receipt
	Mailing Address 709 AVENIDA MIROL	A		04 30 7 2011
	City	State Zip C		Transaction ID: PR10363474843
	PALOS VERDES EST	CA 9027	74	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer Pacific Life	Occupation REGIONAL VP		
	Receipt For: Primary General	Aggregate Year-to-D	Pate ▼	
	Primary General Other (specify) ▼		1600.00	P/R Deduction (\$400.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. LAURENE E MAC ELWEE	1		Date of Receipt
	Mailing Address 1033 SECRETARIAT	0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State Zip C	Code	Transaction ID: PR10363564843
	COSTA MESA	CA 9262	26	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation VP FUND COMP	LIANCE	
	Receipt For:	Aggregate Year-to-D	Pate ▼	
	Primary General Other (specify) ▼		400.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. DESMOND G MARSH	<u> </u>		Date of Receipt
	Mailing Address 74 SETON RD			0 4 3 0 2 0 1 1
	City	State Zip C	Code	Transaction ID: PR10363594843
	IRVINE	CA 9261	2	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer Pacific Life	Occupation AVP ANNUITY A	PPS ADMIN	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Pate ▼ 600.00	P/R Deduction (\$150.00 Monthly)
<u> </u>	SUBTOTAL of Receipts This Page (optional) .			650.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 39 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Pacific Life Insurance Company P	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions
Pacific Life Insurance Company P	onlical Action Committee	-
Full Name (Last, First, Middle Initial) MS. GAIL H MC INTOSH		Date of Receipt
Mailing Address 622 18TH ST		0 4 3 0 2 0 1 1
City	State Zip Code	Transaction ID: PR10363614843
HUNTINGTON BEACH	CA 92648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Pacific Life	Occupation AVP COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. JULIA C MC KINNEY		Date of Receipt
Mailing Address 3615 PASEO DEL	CAMPO	04 30 7 2011
City PALOS VERDES EST	State Zip Code CA 90274	Transaction ID: PR10363634843
FEC ID number of contributing federal political committee.	CA 90274	Amount of Each Receipt this Period 75.00
Name of Employer Pacific Life	Occupation AVP COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. HENRY M MC MILLAN		Date of Receipt
Mailing Address 4006 INLET ISLE	DR	04 30 2011
City	State Zip Code	Transaction ID: PR10363664843
CORONA DEL MAR	CA 92625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation SR VP & CHIEF RISK OFCR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
	•	215.00

	PULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 39 (check only one) X
Any informor for common for for common for c	ation copied from such Reports and S nercial purposes, other than using the	tatements may	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full) : Life Insurance Company Politic	cal Action Co	ommittee	
	me (Last, First, Middle Initial) DREY L MILFS			Date of Receipt
Mailing	Address 26922 ROCKING HOF	RSE LN		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>LAGU</u>	NA HILLS	State CA	Zip Code 92653-5835	Transaction ID: PR10363714843 Amount of Each Receipt this Period
	number of contributing political committee.	C		0.00
Name o Pacific	f Employer Life	Occupatio VP & SE	n CRETARY (Ret.)	
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00	P/R Deduction (\$0.00)
	me (Last, First, Middle Initial) SE T MISCOLTA	l		Date of Receipt
Mailing	Address 20 BRYCE CYN			0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	. VIII 10	State	Zip Code	Transaction ID: PR10363754843
FEC ID	number of contributing political committee.	CA	92656	Amount of Each Receipt this Period 65.00
Name o Pacific	f Employer Life	Occupatio AVP PRO	n OD & PORT MKTG	
	For: rimary General ther (specify) ▼	. '	e Year-to-Date ▼ 260.00	P/R Deduction (\$65.00 Mon-thly)
	me (Last, First, Middle Initial) MES T MORRIS	l		Date of Receipt
	Address 32141 COOK LN			04 30 2011
City		State	Zip Code	Transaction ID: PR10363794843
FEC ID	AN CAPISTRANO number of contributing political committee.	CA	92675	Amount of Each Receipt this Period 416.00
Name o Pacific	f Employer Life	Occupatio CHAIRM	n AN, PRESIDENT & CEO	
	For: rimary General ther (specify) ▼	, '	e Year-to-Date ▼ 1664.00	P/R Deduction (\$416.00 Monthly)
SUBTOTA	AL of Receipts This Page (optional)	1		481.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 39 (check only one) X 11a
A	Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action C	ommittee	
. <u>/</u>	Full Name (Last, First, Middle Initial) MR. JOHN C MULVIHILL			Date of Receipt
	Mailing Address 27382 VIA PRIORAT	<u></u> 0		0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SN JUAN CAPISTRANO	State CA	Zip Code 92675	Transaction ID: PR10363804843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		175.00
	Name of Employer Pacific Life	Occupatio	n SSET MGMT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 700.00	P/R Deduction (\$175.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. JOYCE J PEAD			Date of Receipt
	Mailing Address 25 SUNRISE			0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364004843
	IRVINE	CA	92603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupatio AVP TAL	n LENT ACQ & DEV	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$75.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MS. ALYCE PETERSON			Date of Receipt
	Mailing Address 10033 WINESAP AV	Æ		0 4 3 0 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364024843
	CHERRY VALLEY	CA	92223	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer Pacific Life	Occupation VP MAR	n KETING SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	B/D D
	Other (specify)		320.00	P/R Deduction (\$80.00 Mon- thly)
	SUBTOTAL of Receipts This Page (optional)	ı		330.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 39 (check only one) X 11a 11b 11c 12 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action Committee	
Full Name (Last, First, Middle Initial) MR. THEODORE A PREMER		Date of Receipt
Mailing Address 20 MOLINO		0 4 3 0 2 0 1 1
City NEWPORT BEACH	State Zip Code CA 92660	Transaction ID: PR10364084843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer Pacific Life	Occupation VP REAL ESTATE FINANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	P/R Deduction (\$225.00 Monthly)
Full Name (Last, First, Middle Initial) MR. JOSEPH A PUM		Date of Receipt
Mailing Address 33 BOLERO		04 30 7 2011
City MISSION VIEJO	State Zip Code CA 92692	Transaction ID: PR10364094843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer Pacific Life	Occupation INTERNAL AUDIT DIR	-
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. JAMES R RICE	1	Date of Receipt
Mailing Address 11 STILLWATER		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR10364144843
IRVINE FEC ID number of contributing federal political committee.	CA 92603	Amount of Each Receipt this Period 125.00
Name of Employer Pacific Life	Occupation VP M FINANCIAL DISTRIBUTION	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$125.00 Mo- nthly)
SUBTOTAL of Receipts This Page (optional) .	>	425.00
TOTAL This Period (last page this line numbe		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee t	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	tical Action Committee	
Full Name (Last, First, Middle Initial) MR. RICHARD J SCHINDLER		Date of Receipt
Mailing Address 28472 AVENIDA PLA	ACIDA	04 / 30 / Y Y Y Y
City SN JUAN CAPISTRANO	State Zip Code CA 92675	Transaction ID: PR10364264843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Pacific Life	Occupation SR VP LIFE CHF MKTG OFCR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1225.00	P/R Deduction (\$325.00 Monthly)
Full Name (Last, First, Middle Initial) MS. CATHY L SCHWARTZ		Date of Receipt
Mailing Address 87 PELICAN CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR10364314843
NEWPORT BEACH FEC ID number of contributing federal political committee.	CA 92660	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation AVP CREDIT ANALYSIS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. CAROL R SUDBECK		Date of Receipt
Mailing Address 11 SOMMET		0 4 3 0 Y Y Y Y Y
City	State Zip Code	Transaction ID: PR10364504843
NEWPORT COAST FEC ID number of contributing federal political committee.	CA 92657	Amount of Each Receipt this Period 416.00
Name of Employer Pacific Life	Occupation SR VP HR & FACILITIES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1016.00	P/R Deduction (\$416.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	1	841.00

	OULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 39 (check only one) X 11a
or for com	nation copied from such Reports and S imercial purposes, other than using the OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Pacif	c Life Insurance Company Politic	cal Action Co	ommittee	
. MR. JO	ame (Last, First, Middle Initial) DHN G TORELL			Date of Receipt
Mailing ————	Address 355 S LORETTA DR			04 30 7 2011
City ORAI	NCE	State CA	Zip Code	Transaction ID: PR10364584843
FEC II	O number of contributing political committee.	C	92869	Amount of Each Receipt this Period 90.00
Name Pacific	of Employer Life	Occupatio VP ACC	n TG & RPTG	
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	P/R Deduction (\$90.00 Mon-thly)
	ame (Last, First, Middle Initial) FEPHEN J TORETTO			Date of Receipt
Mailing	Address 22862 ORENSE			0 4 3 0 Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: PR10364594843
	ION VIEJO	CA	92691	Amount of Each Receipt this Period
federa	O number of contributing political committee.	C		60.00
Name Pacific	of Employer : Life	Occupatio VP COU		
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$60.00 Mon-thly)
	ame (Last, First, Middle Initial) HANH T TRAN			Date of Receipt
Mailing	Address 47 VERNAL SPG			04 30 2011
City		State	Zip Code	Transaction ID: PR10364604843
	NE D number of contributing political committee.	CA	92603	Amount of Each Receipt this Period 416.66
Name Pacific	of Employer Life	Occupatio EXEC VI		
	ot For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 1666.64	P/R Deduction (\$416.66 Monthly)
SUBTO	AL of Receipts This Page (optional)			566.66

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 39 (check only one) X
A o	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	· ·	Cai Action Co	ommittee	
١.	Full Name (Last, First, Middle Initial) MR. EDDIE D TUNG			Date of Receipt
	Mailing Address PO BOX 10386			04 30 2011
	City NEWPORT BEACH	State CA	Zip Code 92658	Transaction ID: PR10364624843
	FEC ID number of contributing federal political committee.	C	92030	Amount of Each Receipt this Period 75.00
	Name of Employer Pacific Life	Occupatio AVP REG	n GULATORY PROD ACCTG	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 285.00	P/R Deduction (\$75.00 Mon-thly)
. –	Full Name (Last, First, Middle Initial) MR. JOHN M WALDECK			Date of Receipt
	Mailing Address 67 LAURELHURST D	R		0 4 3 0 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364654843
	LADERA RANCH	CA	92694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		175.00
	Name of Employer Pacific Life		IWG & CONST SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	P/R Deduction (\$175.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. JOHN WHITE			Date of Receipt
	Mailing Address 28532 VIA PRIMAVEI	RA		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364744843
	SN JUAN CAPISTRANO FEC ID number of contributing federal political committee.	CA	92675	Amount of Each Receipt this Period 120.00
	Name of Employer Pacific Life	Occupatio VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00	P/R Deduction (\$120.00 Monthly)
Γ,	SUBTOTAL of Receipts This Page (optional) .	<u> </u>		370.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 39 (check only one) X
4	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
. K	Full Name (Last, First, Middle Initial) MS. MARIA ZAMBELLI-DOUGHERTY			Date of Receipt
	Mailing Address 525 LOMBARDY RD			0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City DREXEL HILL	State PA	Zip Code 19026	Transaction ID: PR10364834843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer Pacific Life	Occupatio SUPR O	n PERATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	P/R Deduction (\$60.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. MICHAEL A BELL			Date of Receipt
	Mailing Address 2 PRECIPICE			0 4 3 0 2 0 1 1
	City	State	Zip Code	Transaction ID: PR10365144843
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Pacific Life	Occupation EVP LIF	n E INSURANCE	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1400.00	P/R Deduction (\$350.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. REED J LLOYD			Date of Receipt
	Mailing Address 6 SANDERLING LN			0 4 3 0 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365214843
	ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	- '	VANCED MKTG	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	•		485.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	ical Action Co	ommittee	
. ∠ \.	Full Name (Last, First, Middle Initial) MR. PHILIP A TEETER			Date of Receipt
	Mailing Address 376 MYRTLE ST			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LAGUNA BEACH	State CA	Zip Code 92651	Transaction ID: PR10365474843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	92001	175.00
	Name of Employer Pacific Life	Occupation SR VP T	n ECH & OPS	7
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 655.00	P/R Deduction (\$175.00 Monthly)
 3.	Full Name (Last, First, Middle Initial) MR. TENNYSON S OYLER Mailing Address 52 PEONY			Date of Receipt
				04 30 2011
	City IRVINE	State CA	Zip Code 92618	Transaction ID: PR10365614843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02010	75.00
	Name of Employer Pacific Life	Occupation AVP PUE	n BLIC AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MS. VALERIE MORRIS			Date of Receipt
	Mailing Address 48 W YALE LOOP			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365684843
	IRVINE FEC ID number of contributing federal political committee.	CA	92604	Amount of Each Receipt this Period 100.00
	Name of Employer Pacific Life	Occupation VP HR P	n PRGMS & SVCS	
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 370.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .	1		350.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
A 0	ny information copied from such Reports and s r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action C	ommittee	
<u></u>	Full Name (Last, First, Middle Initial) MS. PATRICIA S DOUGLASS			Date of Receipt
	Mailing Address 640 SAINT JAMES RI	D		04 30 2011
	City NEWPORT BEACH	State CA	Zip Code 92663	Transaction ID: PR10365734843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		275.00
	Name of Employer Pacific Life	Occupatio VP GOV	n T RELNS	7
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1025.00	P/R Deduction (\$275.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. WILLIAM D BURKE			Date of Receipt
	Mailing Address 2216 NELDA WAY			04 30 7 2011
	City	State	Zip Code	Transaction ID: PR10365784843
	ALAMO	CA	94507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation REGION		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. RODERICK P HANSEN			Date of Receipt
	Mailing Address 21612 MARIGOT DR			0 4 3 0 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365854843
	BOCA RATON	<u>FL</u>	33428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Pacific Life	Occupatio REGION	IAL VP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .	•		475.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 39 (check only one) X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Pacific Life Insurance Company Politi	cal Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. JOHN F O'DONNELL			Date of Receipt
	Mailing Address 30 BRIAN RD			04 30 2011
	City	State	Zip Code	Transaction ID: PR10365964843
	BRIDGEWATER	MA	02324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation NATL SI	n LS MGR KEY ACCT MKTG	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$100.00 Mo- nthly)
_	Full Name (Last, First, Middle Initial) MS. JULIET A PINKERTON			Date of Receipt
	Mailing Address 30 HISTORY ROW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365994843
	THE WOODLANDS	TX	77380	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pacific Life	Occupation DIVISIO		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$250.00 Mo- nthly)
	Full Name (Last, First, Middle Initial) MR. RICHARD A TAUBE			Date of Receipt
	Mailing Address 24081 NUTHATCH LN	٧		0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10366044843
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Pacific Life	Occupation VP PRO	n DUCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 310.00	P/R Deduction (\$85.00 Mon-thly)
5	SUBTOTAL of Receipts This Page (optional) .	1		435.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 39 (check only one) X
or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) MR. TRAVIS R MC KAY		Date of Receipt
Mailing Address 210 OXFORD AVE		04 30 7 2011
City CLARENDON HILLS	State Zip Code IL 60514	Transaction ID: PR10366064843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 00014	100.00
Name of Employer Pacific Life	Occupation SR WHOLESALER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. KATHARINE B YOUNG		Date of Receipt
Mailing Address 18647 SANTA ISAD	ORA ST	04 30 2011
City	State Zip Code	Transaction ID: PR10366104843
FOUNTAIN VALLEY	CA 92708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer Pacific Life	Occupation VP VALUATION & RISK MGMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$90.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. CHRISTOPHER VAN MIERLO	-1	Date of Receipt
Mailing Address 400 EL VUELO		04 30 7 2011
City	State Zip Code	Transaction ID: PR10366154843
SAN CLEMENTE FEC ID number of contributing	CA 92672	Amount of Each Receipt this Period
federal political committee.	C	75.00
Name of Employer Pacific Life	Occupation SVP RSD SALES CHF MKTG OFCF	R.
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Monthly)
SUBTOTAL of Receipts This Page (optional)		265.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	itical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. MICHAEL S ROBB			Date of Receipt
Mailing Address 34 CLIFFHOUSE BL	_F		04 / 30 / Y Y Y Y
City NEWPORT COAST	State CA	Zip Code 92657	Transaction ID: PR10366194843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Pacific Life	Occupation EXEC VP	P RE INVEST	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$250.00 Monthly)
Full Name (Last, First, Middle Initial) MR. RICHARD M WILKES			Date of Receipt
Mailing Address 7124 HAWKSBEARI	D DR		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City WESTERVILLE	State OH	Zip Code 43082	Transaction ID: PR10366274843
FEC ID number of contributing federal political committee.	C	45002	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation SR WHO	LESALER	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MR. RICHARD S BANNO			Date of Receipt
Mailing Address 26666 WHITE OAKS	S DR		04 30 2011
City LAGUNA HILLS	State CA	Zip Code 92653	Transaction ID: PR10366284843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32000	75.00
Name of Employer Pacific Life	Occupation AVP CAP	PITAL MKTS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
SUBTOTAL of Receipts This Page (optional)			425.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	M 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 39 (check only one) X
Any information copied from such Report for commercial purposes, other than	oorts and Statements may not be sold or used by any person using the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Compa	ny Political Action Committee	
Full Name (Last, First, Middle Initia MS. MARY ANN BROWN	J)	Date of Receipt
Mailing Address 304 WEYMO	UTH PL	04 30 4 2011
City LAGUNA BEACH	State Zip Code CA 92651	Transaction ID: PR10366314843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer Pacific Life	Occupation EVP CORP DEVELPMT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	P/R Deduction (\$416.66 Monthly)
Full Name (Last, First, Middle Initia MR. SIMON S FENG	J J)	Date of Receipt
Mailing Address 10 CANDELA		0 4 3 0 Y Y Y Y Y Y
City IRVINE	State Zip Code CA 92620	Transaction ID: PR10366354843
FEC ID number of contributing federal political committee.	CA 92620	Amount of Each Receipt this Period 200.00
Name of Employer Pacific Life	Occupation AVP BUS & TECH INTEG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$200.00 Monthly)
Full Name (Last, First, Middle Initia MR. THOMAS GIBBONS	l)	Date of Receipt
Mailing Address 1970 PARK N	IEWPORT	M M / D D / Y Y Y Y O D D / Y O D D D D D D D D D D D D D D D D D D
City	State Zip Code	Transaction ID: PR10366364843
NEWPORT BEACH FEC ID number of contributing federal political committee.	CA 92660	Amount of Each Receipt this Period 315.00
Name of Employer Pacific Life	Occupation SVP TAX	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1215.00	P/R Deduction (\$315.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	931.66

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	nny information copied from such Reports and r for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. JAMES KARAFA			Date of Receipt
	Mailing Address 182 STANHOPE RD			0 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: PR10366404843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Pacific Life	Occupation		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	P/R Deduction (\$125.00 Monthly)
	Full Name (Last, First, Middle Initial) MS. LINDA L KOTOWICZ			Date of Receipt
	Mailing Address 795 TREPHANNY LN	I		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10366794843
	WAYNE FEC ID number of contributing federal political committee.	C	19087	Amount of Each Receipt this Period 60.00
	Name of Employer Pacific Life	Occupation		_
	Receipt For:	FVP M N Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	7 1991 09411	240.00	P/R Deduction (\$60.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. DAWN M TRAUTMAN			Date of Receipt
	Mailing Address 7424 CITY LIGHTS [)R		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10366864843
	ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		105.00
	Name of Employer Pacific Life	_ '	T & STRATEGIC PLNG	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	P/R Deduction (\$105.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		290.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 39 (check only one) X	
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee		
. ∠ \.	Full Name (Last, First, Middle Initial) MR. JEFFREY R WILT			Date of Receipt	
	Mailing Address 1 BAILEY DRIVE			04 30 7 2011	
	City	State	Zip Code	Transaction ID: PR10366884843	
	GLENWOOD FEC ID number of contributing federal political committee.	C	07418	Amount of Each Receipt this Period 55.00	
	Name of Employer Pacific Life	Occupation	n		
		REGION			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$55.00 Mon-thly)	
 s.	Full Name (Last, First, Middle Initial) MR. STUART A HOLLAND			Date of Receipt	
	Mailing Address 4931 CAREFREE TRA	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR10366914843	
	PARKER FEC ID number of contributing federal political committee.	CO	80134	Amount of Each Receipt this Period 75.00	
	Name of Employer Pacific Life	Occupation SR FVP-			
	Receipt For: Primary General		Year-to-Date ▼	P/R Deduction (\$75.00 Mon-	
	Other (specify)		300.00	thly)	
_	Full Name (Last, First, Middle Initial) MR. JIM Y CHU			Date of Receipt	
	Mailing Address 22931 GALAXY LN			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR10367144843	
	LAKE FOREST FEC ID number of contributing federal political committee.	CA	92630	Amount of Each Receipt this Period 100.00	
	Name of Employer Pacific Life	Occupation AVP PRI	n CING & DESIGN		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)	
Г	SUBTOTAL of Receipts This Page (optional)	1		230.00	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 39 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit			
Full Name (Last, First, Middle Initial) MR. STEVEN H GOLDBERG			Date of Receipt
Mailing Address 11 TWIN FLOWER S	ST		M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: PR10367184843
LADERA RANCH	CA	92694	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Pacific Life	Occupation DIR ANN	n IUITIES PRODUCT DEVELF	─ - PMT
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. MATTHEW WELLS		_ 0 0 0 0 0 0 0	Date of Receipt
Mailing Address 120 BONITA DR			0 4 3 0 2 0 1 1
City	State	Zip Code	Transaction ID: PR10614924843
HOMEWOOD	AL	35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation SR WHC	n DLESALER	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. RAE A MCKEATING			Date of Receipt
Mailing Address 25842 DANA BLF W			04 30 7 2011
City	State	Zip Code	Transaction ID: PR22130714843
CAPISTRANO BEACH	CA	92624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		70.00
Name of Employer Pacific Life	Occupation AVP LEG		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	P/R Deduction (\$70.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	•		245.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36/39 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pol	litical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. EDWIN J FERRELL			Date of Receipt
Mailing Address 34 CASTLEROCK			0 4
City IRVINE	State CA	Zip Code 92603	Transaction ID: PR22130754843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation VP CREI	n DIT ANALYSIS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. JENNIFER L KRUMM	1		Date of Receipt
Mailing Address 22 AMBROISE			04 30 4 2011
City NEWPORT COAST	State CA	Zip Code 92657	Transaction ID: PR22130804843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		65.00
Name of Employer Pacific Life	Occupation AVP FIN	a & DERIVATIVE RPTG	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$65.00 Monthly)
Full Name (Last, First, Middle Initial) MS. SUSAN M KEELING			Date of Receipt
Mailing Address 406 1/2 HELIOTRO	PE AVE		0 4 3 0 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR22130824843
CORONA DEL MAR FEC ID number of contributing federal political committee.	CA	92625	Amount of Each Receipt this Period 70.00
Name of Employer Pacific Life	Occupation AVP INV	n MGT ACCTG & RPTG	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 205.00	P/R Deduction (\$70.00 Mon-thly)
			235.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e (check only one)
or for commercial purposes, other than using t	Statements may not be sold or used by ar he name and address of any political comn	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) MR. TIMOTHY C MYERS		Date of Receipt
Mailing Address 23819 CLAYMORE		04 30 7 2011
City VALENCIA	State Zip Code CA 91354	Transaction ID: PR22130864843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer Pacific Life	Occupation CORP TAX DIRECTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$90.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. DOUGLAS P JACKSON		Date of Receipt
Mailing Address 59 AUGUSTA		0 4 3 0 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR32777124843
COTO DE CAZA FEC ID number of contributing federal political committee.	CA 92679	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation FVP SALES DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. ADRIENNE MOUCH	1	Date of Receipt
Mailing Address 2524 W WATROUS	AVE	0 4 3 0 2 0 1 1
City TAMPA	State Zip Code FL 33629	Transaction ID: PR33677904843
FEC ID number of contributing federal political committee.	FL 33629	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation REGIONAL VP	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.0	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	•	290.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 39 (check only one) X
4	Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic			
. ∠ \.	Full Name (Last, First, Middle Initial) MR. JAMES P WITKOWSKI			Date of Receipt
	Mailing Address 5620 FOXTAIL LOOP			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CARLSBAD	State CA	Zip Code 92010	Transaction ID: PR33678024843 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer Pacific Life	Occupation	n L MKTG DIR	7
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 205.00	P/R Deduction (\$70.00 Mon-thly)
 3.	Full Name (Last, First, Middle Initial) MR. VINCENT A SPERA			Date of Receipt
	Mailing Address 1616 LOOKOUT CIR			04 / 30 / 2011
	City WAXHAW	State NC	Zip Code 28173	Transaction ID: PR43582354843
	FEC ID number of contributing federal political committee.	C	20173	Amount of Each Receipt this Period 75.00
	Name of Employer Pacific Life	Occupation FVP FIFI	n LD WHOLESALING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. CADE H CHERRY			Date of Receipt
-	Mailing Address 20 ESTERO POINTE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61125884843
	ALISO VIEJO FEC ID number of contributing federal political committee.	CA	92656	Amount of Each Receipt this Period 75.00
	Name of Employer Pacific Life	Occupation AVP STR	ATEGIC PLANNING	7
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	P/R Deduction (\$75.00 Mon-thly)
	SUBTOTAL of Receipts This Page (optional)			220.00

A.

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 39/39 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) MR. GARY L FALDE Date of Receipt Mailing Address 9212 SANTIAGO DR 0 4 3 0 2011 City State Zip Code Transaction ID: PR61125904843 **HUNTINGTON BEACH** CA 92646 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Pacific Life Occupation **VP & CHIEF ACTUARY** Receipt For: Aggregate Year-to-Date Primary General P/R Deduction (\$75.00 Mon-300.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	75.00
TOTAL This Period (last page this line number only)	•	22034.64